

CLAIMS ONLY

SERIAL NO. _____

FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7	1					
8	1					
9	1					
10	1					
11		1				
12		1				
13		1				
14		1				
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50						
TOTAL IND.	12	1	1	1	1	1
TOTAL DEP.	10	1	1	1	1	1
TOTAL CLAIMS	22	1	1	1	1	1

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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99						
100						
TOTAL IND.			1	1	1	1
TOTAL DEP.			1	1	1	1
TOTAL CLAIMS			1	1	1	1

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS